

## **DIVISION OF AIR QUALITY REQUEST FOR PUBLIC INFORMATION**

Requester's Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Today's Date: \_\_\_\_\_

In accordance with the Governmental Records Access Management Act, I am requesting to view the following record(s) (specifically described):

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**Copying Procedures:**

If copying less than 25 total pages can be done while customer waits.

If copying 25 or more pages, may take up to (5) working days, which will be sent upon receipt of copying fee.

Request for copies over 10 pages is \$.25 per page.

Copies made by the requestor are \$.05 per page.

I understand the above copying procedures and if I desire that copies be produced, I am prepared to pay such costs.

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(Signature)

(Date)

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### **AGENCY USE ONLY**

Department:	Environmental Quality
Division:	Air Quality
Address:	150 North 1950 West, Salt Lake City, Utah 84116
Mailing Address:	PO Box 144820, Salt Lake City, Utah 84114-4820

Total Number of Copies: \_\_\_\_\_ Coping Fee: \_\_\_\_\_

Date of Request: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Division Signature: \_\_\_\_\_